



Form 400-A Instructions

Form 400-A is required for most applications for permits.

Please follow the instructions below for completing Form 400-A. If you need assistance please call AQMD Permit Services at (909) 396-2468.

Note: Supplemental forms may also be required. Instructions for completing supplemental forms are printed on each form.

COMPANY INFORMATION

LEGAL NAME OF OPERATOR:	Please identify the legal entity that operates the equipment.
IRS OR S.S. NUMBER:	This information is used for identification purposes. Please enter the Internal Revenue Service (IRS) or Social Security (S.S.) number of the applicant and check the appropriate box.
PERMIT TO BE ISSUED TO:	Special formatting <u>MUST</u> be used on the permit to identify both the owner and the operator.
BUSINESS MAILING ADDRESS:	Please identify the address where all business correspondence is to be mailed, e.g. Billing, Permits, etc.
PERMIT MAILING ADDRESS, IF DIFFERENT FROM MAILING ADDRESS	If the Permit to Operate or Permit to Construct should be mailed to an address other than the business mailing address or the location address, list the permit mailing address here.
TYPE OF ORGANIZATION:	Please check the one box that best describes your organization. If "other" is checked, please describe the type of organization.
SMALL BUSINESS:	Reduced fees are available for businesses which employ 10 or fewer employees and which have total gross annual receipts of \$500,000 or less. Please check "yes" if your company meets both conditions.
AVERAGE ANNUAL GROSS RECEIPTS/NUMBER OF EMPLOYEES:	This information is used to determine if you qualify as a small business as defined under state laws (<u>not</u> the same as AQMD definition for reduced fees). Special programs and assistance, such as low interest loans, are available for small businesses. For further information on eligibility and programs, please call the AQMD Small Business Assistance Office at 1-800-288-7664.
WOMEN/MINORITY OWNED BUSINESS:	Qualifying businesses are eligible for special programs. Please call the Small Business Assistance Office for information at 1-800-288-7664.
COMPLIANCE WITH AIR POLLUTION RULES	For new construction or major modifications to existing permitted equipment, are all major sources under the same ownership as this facility in California in compliance with all federal, state, and local air pollution control rules? Answer Yes or No .
OWNERSHIP OF EQUIPMENT:	If you are not the owner of the equipment under this application, please check "no" and enter the name and IRS or S.S. number of the legal owner.

FACILITY INFORMATION

EQUIPMENT ADDRESS/LOCATION: Please identify the address where the equipment will be located. If no U.S. Postal Service address is available, please provide a location description and zip code. For equipment to be operated at various locations, state "various locations in AQMD" and enter the initial operating location.

FACILITY NAME: Please enter the name of the facility where the equipment is located.

FACILITY I.D. NO.: If your facility or company has an existing I.D. number, please enter it in the space provided. For a Change of Operator or a new facility application, leave this field blank.

CONTACT PERSON NAME AND TITLE: Please identify the person from your company or facility who is to be contacted regarding this application and include their title.

TYPE OF BUSINESS AT THIS FACILITY: This information is used by AQMD for planning and statistical purposes. Please state the type of business you conduct at this facility (e.g., refinery, paint manufacturing, dry cleaner, restaurant, etc.).

PRIMARY SIC CODE: This information is used by AQMD for planning and statistical purposes. Using the provided list of business codes, please enter the single code (*SIC code for this business*) which best describes your business activity at this facility, or provide your Standard Industrial Classification (SIC) Code from your State Business license.

NUMBER OF EMPLOYEES: Enter the number of employees presently working at this location.

CONTACT PERSONS TELEPHONE NO. FAX NO. AND E-MAIL ADDRESS: Enter the contact persons work telephone number and work fax number, including area codes, and their e-mail address, if applicable.

APPLICATION TYPE

DESCRIPTION OF EQUIPMENT : Permits are issued specific to the equipment or process described in the application. Please enter a brief and concise description of the equipment or process, be sure to include the following:

Concrete Batch Plant, Transit-Mixed; or Emergency Generator,
Caterpillar, Model 3406B TA, Diesel, 450 H.P., 300 kW, Serial No.
G54675PB001.

PREVIOUS PERMIT: Previous permit number is required when filing for Change of Operator/Owner, Alteration, Modification, Change of Location, and Change of Condition.

APPLICATION FOR :
Please check all applicable boxes

New Construction	New equipment which has not yet been constructed and requires a permit to construct; or equipment only needing a permit to operate.
Existing Equipment Operating Without Permit	Equipment which has been in operation without a prior permit issued by the AQMD.

Existing Equipment with Expired Permit	Equipment where permit has been expired for <u>more than one year</u> due to unpaid fees.
Modification	Existing permitted equipment which is physically altered by the removal, addition, or non-identical replacement of parts.
Change of Permittee	Requesting permit for already permitted equipment which will be operated by a new operator.
Change of Location	Permitted equipment which will be transferred from one property to another.
Change of Permit Condition	Permitted equipment for which the owner/operator is requesting a change in permitted operating conditions.

IDENTICAL PERMIT UNITS SUBMITTED SIMULTANEOUSLY: Lower fees are provided for identical permit units which are submitted at the same time (full fee for first permit and 50% fee for each additional permit). This does not apply to Certified Equipment Permits, Registration Permits, Non-Road and Qualifying Equipment Permits, and Statewide Equipment Permits.

SUPPLEMENTAL INFORMATION:

In addition to this application, detailed information regarding the facility, equipment, process, operating conditions, and emissions is required. The list of information is outlined in the forms tabulated below. Supplemental 400E forms (400-E-1 through 400-E-23) are designed for specific equipment or processes. If no 400E form applies to your equipment or process, please submit additional information listed on Form 400-E-GI. Other information, such as air quality modeling and risk assessment, may be required in special cases. For more information, please contact AQMD Permit Services at (909) 396-2468.

ESTIMATED COST OF EQUIPMENT OR MODIFICATION: This information is used by AQMD for planning and statistical purposes. For modification or new construction (including existing equipment without a previous permit), please enter the cost of basic equipment (without air pollution control) and, if applicable, the air pollution control equipment cost.

NEW CONSTRUCTION OR MODIFICATION - START AND COMPLETION DATE: This information determines the billing cycle for annual operating fees. Please enter the start date and the completion date of any new construction or equipment modification.

CHANGE OF PERMITTEE, LOCATION OR CONDITION - DATE: This information determines the billing cycle for annual operating fees. For cases in this category, please enter the future date when the change is anticipated.

EXISTING EQUIPMENT OPERATING WITHOUT A PERMIT - DATE: For this category of equipment, please enter the date when this equipment was first operated.

**CALIFORNIA ENVIRONMENTAL
QUALITY ACT:**

A California Environmental Quality Act (CEQA) document (e.g., environmental impact report, negative declaration) is required for any project which results in a significant effect on the environment. If such a document has been required by another governmental agency, please enter the name of the lead agency, and submit an approved copy with this application.

CONFIDENTIALITY:

AQMD records are subject to the California Public Records Act. To claim confidentiality on information submitted with this application, check "yes". Please be sure that all submitted information which you wish to have kept confidential is clearly marked as such. Please also state the reason(s) for claiming confidentiality. Examples of acceptable reasons are trade secrets and production data. Please note that information on emissions and permits cannot be confidential.

**NOTICE TO COMPLY AND
NOTICE OF VIOLATION:**

If a Notice to Comply (NC) or Notice of Violation (NOV) was ever issued by AQMD due to operation of this equipment, please check "yes" and enter the appropriate notice number and the date the notice was issued.

TITLE V APPLICATION CERTIFICATION

This form provides information for Title V facilities. If your facility is included in the Title V program, please refer to the detailed instructions available in the Title V Application Package.